

State Interagency Coordinating Council

Testimony of Cindy Jackson

HB 5037, "An Act Adjusting the State Budget for The Biennium Ending June 30, 2023"

Appropriations Subcommittee on Elementary and Secondary Education

February 17, 2022

Cynthia Jackson
ICC Chair/Provider
Leona Adamczyk
ICC Vice/Parent
Ann Gionet
Dept. of Public Health
Tiffanie Allain
Parent Representative
Kim Nilson
Dept. for Children and Families
Maris Pelkey
Creative Interventions
Elaine Balsley
ReachOut
Nicole Cossette
Office of Early Childhood
Senator Mary Abrams
State Senator
Shanda Easley
Parent representative
Sharon Marie
Dept. of Aging & Disabilities Services
Ginny, Mahoney
Dept. of Social Services
Anne Giordano
Education Connection
Carol Peltier
American School for the Deaf
Louis Tallarita
SDE-Homeless Children
Andrea Brinnell
SDE-619
Karen Pascale
Early Head Start
Myra Watnick
Rehabilitation Associates, Inc.
Ann Milanese, M.D.
American Academy of Pediatrics
Representative Liz Linehan
House of Representatives
Tammy Venenga
Dept. Of Developmental Services
Mary Beth Bruder
UCEDD

Dear Senator Osten, Representative Walker and distinguished members of the Appropriations Committee, my name is Cindy Jackson, and I am the chairperson of the Birth To Three Interagency Coordinating Council and Director of Children's Therapy Services, a state-contracted birth to three provider. Thank you for the opportunity to offer testimony regarding HB 5037, An Act Adjusting the State Budget for the Biennium Ending June 30, 2023. Specifically, I am here today to testify about the negative impact 5 years of level funding and the COVID-19 pandemic has had on Birth To Three (B23) services in our State.

The Office of Early Childhood (OEC) is Connecticut's lead agency that administers Part C of the Individuals With Disabilities Education Act, which we call the Birth to Three System. The OEC contracts with 19 agencies across the state to provide early intervention services for the families of infants and toddlers, ages birth up to age 3. B23 providers play a critical role in operating the comprehensive statewide program by working with families in their communities to meet the developmental and health-related needs of their infants and toddlers who have delays or disabilities. In short, Connecticut's Birth to Three System supports families to enhance their child's development and connect with their community.

The two greatest challenges facing providers is funding and workforce.

Funding: B23 rates and General Administrative Payment per child have not increased since 2015. At that time, the system moved to a fee for service payment system. Therefore, a provider is only reimbursed when a child is seen for a direct service. During the public health emergency, referrals significantly decreased, and many visits were (and continue to be) cancelled as families experience illness, quarantine or are just overwhelmed even though providers quickly moved to remote services and back to in person services when warranted. Except for limited PPE support, providers have not been included in any additional funding to help offset the decreased income during this time.

Providers have always worked hard to not let this impact services to families, but a recent survey showed that 40% of the B23 programs will be forced to close or significantly reduce capacity if state funding does not increase in the next fiscal year.

Workforce: The B23 workforce is the most critical element to providing quality care to eligible children and families. There are high salary costs because staff are highly

Lisa Opert
Parent Representative
Robb Dunn
Parent Representative
David Gonzalez-Rice
Parent representative
Lauren Black
Parent Representative
Melissa Roberts
Department of Insurance

trained, professional, certified/licensed clinicians that demand competitive salaries. It has been extremely difficult to attract new clinicians due to low salaries, high travel costs and required procedural documentation/trainings. Retention of staff is difficult because clinicians are leaving B23 to work in other sectors where they will receive higher salaries and better benefits. Staff burnout and high stress levels result in low morale and poor retention which adversely affects services to children and families.

Staff turnover interrupts the therapeutic relationship and can slow progress for the children. Families have fewer choices of therapists/ programs as most experience staff shortages. Families are waiting longer for evaluations, autism assessments and the start of services.

We ask that there be immediate and long-term solutions to stabilize B23 services.

Immediate Recommendation:

- Increase monthly General Administrative Payment to programs per enrolled child
- Award a one-time payment to programs based on enrollment (similar to Massachusetts Amendment No. 254 (11/21/21))

Long Term Recommendations:

- Workforce: Develop a state loan forgiveness program for staff working in B23 and Review Personnel requirements and regulations that add to staff burden and negatively influence recruitment and retention
- Funding: Revision of regulations to provide predictable rate increase to account for the cost of doing business and revise funding streams to support long -term General Administrative payment increase.

Thank you for your consideration of these recommendations that support the stability of Birth To Three and the continuation of quality services to infants and children with developmental delays and their families.

Sincerely,

Cindy Jackson, Chairperson

Birth to Three Interagency Coordinating Council

Children's Therapy Services